

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

RGA RIGHT DIRECTION PAC

ADDRESS (number and street)

1747 PENNSYLVANIA AVE NW SUITE 250

☐ Check if different than previously reported. (ACC)

WASHINGTON

DC

20006

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00490730

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☒ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
04 01 2014

through

M M M / D D D / Y Y Y Y Y Y  
06 30 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Michael Adams

Signature of Treasurer

Michael Adams

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
07 09 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

RGA RIGHT DIRECTION PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
04		01		2014

To:

M M	/	D D	/	Y Y Y Y Y
06		30		2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <div><div>Y Y Y Y Y</div><div>2014</div></div>		<div><div></div><div>49466.57</div></div>
(b) Cash on Hand at Beginning of Reporting Period.....	<div><div></div><div>999471.40</div></div>	
(c) Total Receipts (from Line 19) .....	<div><div></div><div>723007.81</div></div>	<div><div></div><div>1723007.81</div></div>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<div><div></div><div>1722479.21</div></div>	<div><div></div><div>1772474.38</div></div>
7. Total Disbursements (from Line 31).....	<div><div></div><div>1236905.18</div></div>	<div><div></div><div>1286900.35</div></div>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<div><div></div><div>485574.03</div></div>	<div><div></div><div>485574.03</div></div>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<div><div></div><div>0.00</div></div>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<div><div></div><div>0.00</div></div>	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**RGARIGHT DIRECTION PAC**

Report Covering the Period:

From:

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	01	/	2014

To:

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2014

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

0.00

0.00

(ii) Unitemized .....

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

0.00

0.00

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

700000.00

1700000.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ▶

700000.00

1700000.00

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

23007.81

23007.81

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

## 19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c)) ..... ▶

723007.81

1723007.81

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ▶

723007.81

1723007.81

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	285.00	585.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	285.00	585.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	1236620.18	1286315.35
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1236905.18	1286900.35
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1236905.18	1286900.35

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	700000.00	1700000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	700000.00	1700000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	285.00	585.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	285.00	585.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 12

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**RGH RIGHT DIRECTION PAC**

Full Name (Last, First, Middle Initial)

## **A. Republican Governors Association**

Mailing Address 1747 Pennsylvania Ave NW  
Suite 250

City State Zip Code  
Washington DC 20006

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 16 / 2014

**Transaction ID : SA11C.4558**

Amount of Each Receipt this Period

500000.00

Contribution

Full Name (Last, First, Middle Initial)

## **B. Republican Governors Association**

Mailing Address 1747 Pennsylvania Ave NW  
Suite 250

City State Zip Code  
Washington DC 20006

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1700000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2014

**Transaction ID : SA11C.4559**

Amount of Each Receipt this Period

200000.00

Contribution

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

700000.00

**TOTAL** This Period (last page this line number only)..... ►

700000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 7 OF 12

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**RGH RIGHT DIRECTION PAC**

Full Name (Last, First, Middle Initial)

## **A. Governor Branstad Committee**

Mailing Address 2775 86th St

City

Urbandale

State

IA

Zip Code

50322

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

23007.81

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 16 / 2014

Transaction ID : SA17.4557

Amount of Each Receipt this Period

23007.81

Sale of Research & Footage

Full Name (Last, First, Middle Initial)

## **B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

23007.81

23007.81

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

RGA RIGHT DIRECTION PAC

### A. Koch & Hoos, LLC

Date of Disbursement

Transaction ID : SB21B.4539

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Amount of Each Disbursement this Period

255.00

**B.**

Date of Disbursement

City	State	Zip Code
------	-------	----------

### Purpose of Disbursement

Candidate Name	Score
John Doe	85
Jane Smith	78
Michael Johnson	92
Sarah Williams	88
David Brown	75
Emily Davis	82
James Wilson	79
Alice Miller	86
Robert Taylor	77
Laura Anderson	83
Christopher Lee	76
Michelle Garcia	81
Daniel Martinez	74
Stephanie White	87
Kevin Hall	73
Nicole Young	84
Brandon King	72
Rebecca Scott	89
Gregory Adams	71
Hannah Baker	80
Timothy Clark	70
Olivia Hall	85
Benjamin King	69
Isabella Scott	86
Lucas Adams	68
Mia Baker	87
Noah Clark	67
Charlotte Hall	88
Liam King	66
Amelia Scott	89
Oliver Adams	65
Harper Baker	90
Elijah Clark	64
Evelyn Hall	91
Isaac King	63
Abigail Scott	92
Wyatt Adams	62
Madison Baker	93
Grayson Clark	61
Chloe Hall	94
Isaiah King	60
Victoria Scott	95
Jeremiah Adams	59
Madeline Baker	96
Adrian Clark	58
Josephine Hall	97
Isaiah King	57
Clara Scott	98
Isaiah Adams	56
Clara Baker	99
Isaiah Clark	55
Clara Hall	100


Amount of Each Disbursement this Period

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

Mailing Address

City	State	Zip Code
------	-------	----------

### Purpose of Disbursement

Candidate Name


Amount of Each Disbursement this Period

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional).....

255.00

**TOTAL** This Period (last page this line number only).....

255.00



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 9 OF 12

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**RGa RIGHT DIRECTION PAC**

Full Name (Last, First, Middle Initial)

**A. Chatham Light Media LLC**

Mailing Address PO Box 1330

City	State	Zip Code
Stowe	VT	05672

Purpose of Disbursement  
Non-Federal Media Production

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		17		2014

**Transaction ID : SB29.4552**

Amount of Each Disbursement this Period

14250.00
----------

Full Name (Last, First, Middle Initial)

**B. Chatham Light Media LLC**

Mailing Address PO Box 1330

City	State	Zip Code
Stowe	VT	05672

Purpose of Disbursement  
Non-Federal Media Production

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		19		2014

**Transaction ID : SB29.4554**

Amount of Each Disbursement this Period

4745.00
---------

Full Name (Last, First, Middle Initial)

**C. Governor Branstad Committee**

Mailing Address 2775 86th St

City	State	Zip Code
Urbandale	IA	50322

Purpose of Disbursement  
Non-Federal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		19		2014

**Transaction ID : SB29.4555**

Amount of Each Disbursement this Period

25000.00
----------

**SUBTOTAL** of Disbursements This Page (optional).....▶

43995.00
----------

**TOTAL** This Period (last page this line number only).....▶

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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 12

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**RGARIGHT DIRECTION PAC**

Full Name (Last, First, Middle Initial)

**A. Kevin Hall**

Mailing Address 7640 NW 54th Ave

City	State	Zip Code
Johnston	IA	50131

Purpose of Disbursement  
Non-Federal Videography Services

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		03		2014

**Transaction ID : SB29.4534**

Amount of Each Disbursement this Period

1190.40
---------

Full Name (Last, First, Middle Initial)

**B. Kevin Hall**

Mailing Address 7640 NW 54th Ave

City	State	Zip Code
Johnston	IA	50131

Purpose of Disbursement  
Non-Federal Videography Services

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		01		2014

**Transaction ID : SB29.4535**

Amount of Each Disbursement this Period

1058.24
---------

Full Name (Last, First, Middle Initial)

**C. Kevin Hall**

Mailing Address 7640 NW 54th Ave

City	State	Zip Code
Johnston	IA	50131

Purpose of Disbursement  
Non-Federal Videography Services

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		05		2014

**Transaction ID : SB29.4545**

Amount of Each Disbursement this Period

1019.04
---------

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3267.68
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 12

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**RGARIGHT DIRECTION PAC**

Full Name (Last, First, Middle Initial)

**A. National Research Inc.**

Mailing Address 146 State Highway 34

City	State	Zip Code
Holmdel	NJ	07733

Purpose of Disbursement  
Non-Federal Survey Research

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		08		2014

**Transaction ID : SB29.4536**

Amount of Each Disbursement this Period

42000.00
----------

Full Name (Last, First, Middle Initial)

**B. Pinpoint Media LLC**

Mailing Address 4659 Kinsey Ln

City	State	Zip Code
Alexandria	VA	22311

Purpose of Disbursement  
Non-Federal Media Buy

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		02		2014

**Transaction ID : SB29.4541**

Amount of Each Disbursement this Period

416652.50
-----------

Full Name (Last, First, Middle Initial)

**C. Pinpoint Media LLC**

Mailing Address 4659 Kinsey Ln

City	State	Zip Code
Alexandria	VA	22311

Purpose of Disbursement  
Non-Federal Media Buy

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		06		2014

**Transaction ID : SB29.4546**

Amount of Each Disbursement this Period

348252.50
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

806905.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 12

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**RGARIGHT DIRECTION PAC**

Full Name (Last, First, Middle Initial)

**A. Pinpoint Media LLC**

Mailing Address 4659 Kinsey Ln

City  
AlexandriaState  
VAZip Code  
22311Purpose of Disbursement  
Non-Federal Media Buy

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼
Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	17	/	2014

**Transaction ID : SB29.4548**

Amount of Each Disbursement this Period

382452.50
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**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼
Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Disbursement this Period

--

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼
Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Disbursement this Period

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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

382452.50
1236620.18